

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

DIVISION OF INSURANCE
STATE OF ILLINOIS/IDFPR
FILED

JAN 01 2008

SPRINGFIELD, ILLINOIS

Change in Company's premium or rate level produced by rate revision
effective January 1, 2008.

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability Private		
Passenger		0.00%
Commercial		0.00%
2. Automobile Physical Damage		
Private Passenger		0.00%
Commercial		0.00%
3. Liability Other Than Auto		0.00%
4. Burglary and Theft		0.00%
5. Glass		0.00%
6. Fidelity		0.00%
7. Surety		0.00%
8. Boiler and Machinery		0.00%
9. Fire		0.00%
10. Extended Coverage		0.00%
11. Inland Marine		0.00%
12. Homeowners		0.00%
13. Commercial Multi-Peril		0.00%
14. Crop Hail		0.00%
15. Other <u>Workers Compensation</u>	<u>\$47,638.00</u>	<u>4.00%</u>
<u>Life of Insurance</u>		

Does filing only apply to certain territory (territories) or certain
classes? If so, specify: NOBrief description of filing. (If filing follows rates of an advisory
organization, specify organization): ADOPTION OF NCCI'S VOLUNTARY ADVISORY RATES,
RATING VALUES AND RETROSPECTIVE RATING PLAN PARAMETERS EFFECTIVE JANUARY 1, 2008.

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of
new rates.ADVANTAGE WORKERS COMPENSATION INS. CO.Name of CompanyGwen E. Church - Assistant Vice PresidentOfficial--Title

DEPT. OF REVENUE
STATE OF ILLINOIS
JAN 01 2008

SPRINGFIELD, ILLINOIS SUMMARY SHEET

Form (RF-3)

Change in Company's premium or rate level produced by rate
revision effective January 1, 2008

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers' Compensation</u>	<u>194,666</u>	<u>+0.05%</u>
<u>Line of Insurance</u>		

Does filing only apply to certain territory (territories) or certain classes?
If so, specify: No

Brief description of filing. (If filing follows rates of an advisory
organization, specify organization): Adoption of NCCI's 01/01/08 Loss Costs
while maintaining our current loss cost multiplier of 1.30 for all class codes.

* Adjusted to reflect all prior rate changes.
** Change in Company's premium level which will
result from application of new rates.

BancInsure, Inc.
Name of Company

Kathryn A. Shilling - Filings Analyst
Official - Title

H29219D

SUMMARY SHEET

Change in Company's premium or rate level produced by rate
revision effective 1-1-08

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers Compensation</u>	<u>12,519,974</u>	<u>+1.6%</u>
<u>Line of Insurance</u>		

Does filing only apply to certain territory (territories) or certain classes?
If so, specify: Applies to all territories

Brief description of filing. (If filing follows rates of an advisory
organization, specify organization): Filing to adopt NCCI's 1-1-08 voluntary
loss costs using our previously approved multiplier

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will
result from application of new rates.

Bituminous Casualty Corporation
Name of Company

Dan Trotter - Director - Rate Development & Filings
Official - Title

SUMMARY SHEET

Change in Company's premium or rate level produced by rate
revision effective 1-1-08.

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers Compensation</u>	<u>3,060,579</u>	<u>+1.6%</u>
<u>Line of Insurance</u>		

Does filing only apply to certain territory (territories) or certain classes?
If so, specify: Applies to all territories

Brief description of filing. (If filing follows rates of an advisory
organization, specify organization): Filing to adopt NCCI's 1-1-08 voluntary
loss costs using our previously approved multiplier

- * Adjusted to reflect all prior rate changes.
** Change in Company's premium level which will
result from application of new rates.

Bituminous Fire and Marine Insurance Company
Name of Company

Dan Trotter - Director - Rate Development & Filings
Official - Title

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective

January 01, 2008

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers Compensation</u>	3,629,447	+4.0%
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

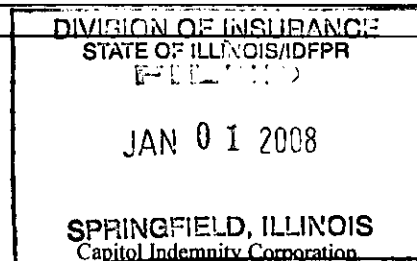
No

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Adoption of NCCI State Filing Circular IL 2007-05 & State Information Circular IL-2007-07

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.



Name of Company

Lois Beld, Senior Rate
Analysis

Official - Title

ILLINOIS SUMMARY SHEET

FORM RF-3

RECEIVED

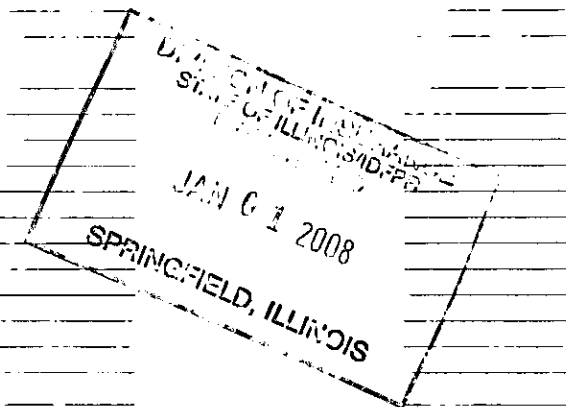
OCT 25 2007

IDFPR (MPC)
DIVISION OF INSURANCE
SPRINGFIELD

01-01-08

Change in Company's premium or rate level produced by rate revision effective

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi Peril		
14. Crop Hail		
15. Workers Compensation	\$4,710,519.00	-2.30%
16. Other		



Does filing only apply to certain territory (territories) or certain classes? If so, Specify

Brief description of filing (if filing follows rates of an advisory organization, specify organization)

* Adjusted to reflect all prior rate changes.

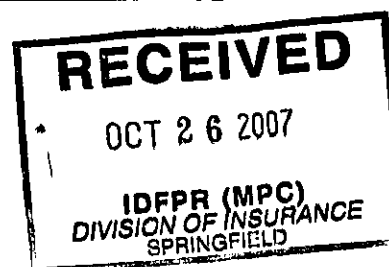
** Change in Company's premium level which will result from application of new rates.

Church Mutual Insurance Company

Name of Company

Director--Casualty Lines

Official - Title



Illinois

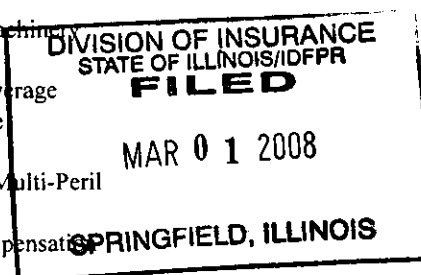
ILLINOIS SUMMARY SHEET

FORM RF-3

Change in Company's premium or rate level produced by rate revision effective:

3/1/08

(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+ or -) **
1 . Automobile Liability		
Private Passenger		
Commercial		
2 . Automobile Physical Damage		
Private Passenger		
Commercial		
3 . Liability Other than Auto		
4 . Burglary and Theft		
5 . Glass		
6 . Fidelity		
7 . Surety		
8 . Boiler and Machinery		
9 . Fire		
10 . Extended Coverage		
11 . Inland Marine		
12 . Homeowners		
13 . Commercial Multi-Peril		
14 . Crop Hail		
15 . Workers Compensation	5,039,826	6.4%
16 . Other:		



Does filing only apply to certain territory (territories) or certain classes? If so, specify.

Not Applicable

Brief description of filing (if filing follows rates of an advisory organization, specify organization).

We are adopting the 1/1/2008 NCCI IL voluntary rates with an effective date of 3/1/2008.

* In-force Written Premium

** Change in Company's premium level which will result from application of new rates.

Continental Casualty Company

Name of Company

Amanda Castello - Actuarial Analyst

Official - Title

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 1/1/2008

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private		
Passenger Commercial		
2. Automobile Physical Damage		
Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers Compensation</u>	<u>1,091,294</u>	<u>1.8%</u>
Line of Insurance		

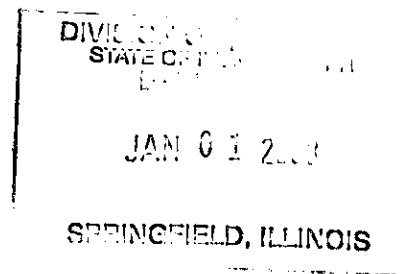
Does filing only apply to certain territory (territories) or certain classes? If so, specify: All except Class Code 8116Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Adopting NCCI loss costs
and modifying LCM's

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

Farmland Mutual Insurance Company

Name of Company

Official - Title

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

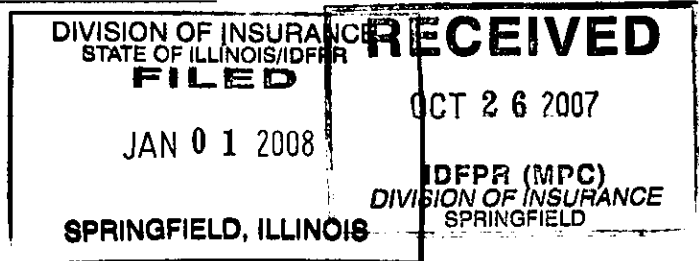
Change in Company's premium or rate level produced by rate revision effective 01/01/08

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers' Compensation</u> Line of Insurance	17,343,472	4.52%

Does filing only apply to certain territory (territories) or certain classes? If so, specify: _____
 Yes, the newly requested 1.05 deviation applies to classes indicated below: _____

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Adopt the January 1, 2008 Advisory Workers' Compensation Rates filed by the National Council on Compensation Insurance effective January 1, 2008. We wish to retain our deviation of 1.05 to the class codes indicated below:

0042 5057 5221 5473 6017 6235 7601
 0050 5059 5222 5474 5539 6018 6236 7605
 1322 5069 5223 5478 5551 6045 6237 7611
 3365 5102 5348 5479 5606 6204 6251 7612
 3719 5146 5402 5480 5610 6206 6252 7613
 3724 5160 5403 5491 5645 6213 6260 7855
 3726 5183 5437 5506 5651 6214 6306 8227
 5020 5188 5443 5507 5703 6216 6319 9534
 5022 5190 5445 5508 5705 6217 6325 9554
 5037 5213 5462 5535 6003 6229 6400
 5040 5215 5472 5537 6005 6233 7538



We also wish to retain our same overall 1.05 deviation. In summary, for the above class codes, the 1.05 would be applied to the rate, and then the overall 1.05 would be applied to that rate. This will result in an increase of .46% for General Casualty Company of Illinois.

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

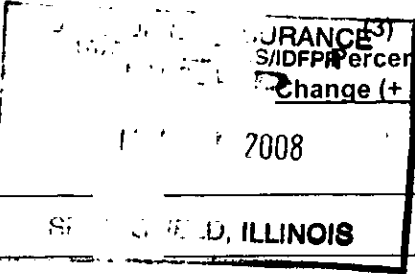
General Casualty Company of Illinois
 Name of Company

Dawn E Underdahl-Systems Support Specialist
 Official - Title

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 1/1/08

(1) Coverage	(2) Annual Premium Volume (Illinois)*	
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers' Compensation</u>	13,078,009	3.82%
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: NoBrief description of filing. (If filing follows rates of an advisory organization, specify organization): Adoption of the NCCI 1/1/08 rates.

*Adjusted to reflect all prior rate changes.

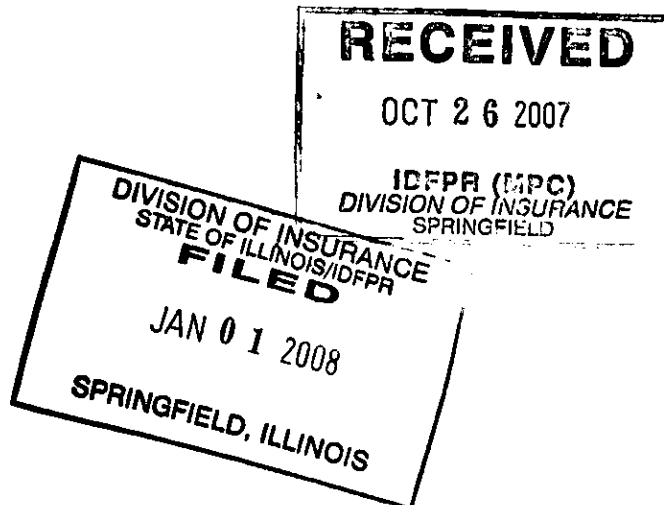
**Change in Company's premium level which will result from application of new rates.

General Casualty Company of Wisconsin

Name of Company

Dawn Underdahl - Systems Support Specialist

Official - Title



SUMMARY SHEET**RECEIVED**

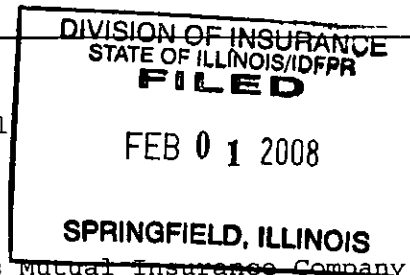
OCT 29 2007

IDFPR (MPC)
DIVISION OF INSURANCE
SPRINGFIELDChange in Company's premium or rate level produced by rate
revision effective 02/01/2008

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers Compensation</u>	<u>583,688</u>	<u>4.4%</u>
<u>Line of Insurance</u>		

Does filing only apply to certain territory (territories) or certain classes?
If so, specify: _____Brief description of filing. (If filing follows rates of an advisory
organization, specify organization): With this filing we are adopting the rate
revision as set forth in NCCI Circular IL-
2007-08.

- * Adjusted to reflect all prior rate changes.
 ** Change in Company's premium level which will
 result from application of new rates.



Graphic Arts Mutual Insurance Company
 Name of Company

George T. Dodd, Vice President/Actuary
 Official - Title

ILLINOIS SUMMARY SHEET FORM RF-3

Change in Company's premium or rate level produced by rate revision effective January 1, 2008

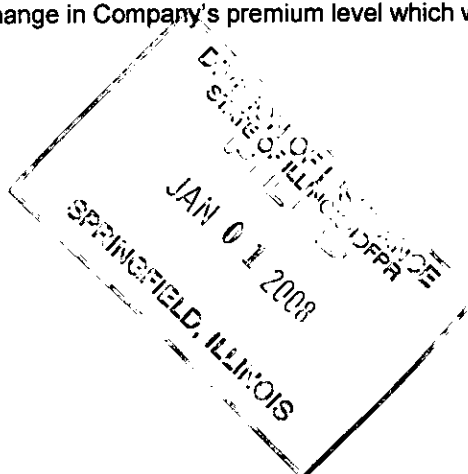
(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Workers Compensation	5,932,325	-2.8%
16. Other _____		
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify No

Brief description of filing (if filing follows rates of an advisory organization, specify organization) Filing to maintain
currently approved deviation of 1.050 to be used effective January 1, 2008 and applied to all January 1, 2008 rates
approved in NCCI Circular IL-2007-08.

* Adjusted to reflect all prior rate changes.

** change in Company's premium level which will result from application of new rates.



Great West Casualty Company
Name of Company

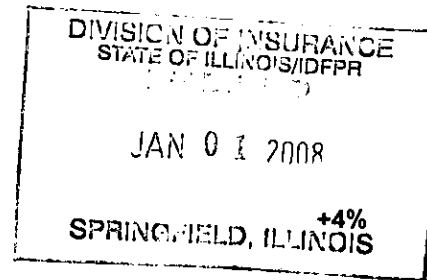
Janice L. Hohenstein, Actuarial Analyst
Official - Title

SUMMARY SHEET

Form (RF-3)

Change in Company's premium or rate level produced by rate revision effective: **1/1/08**

	(1)	(2)	(3)
	<u>Coverage</u>	<u>Annual Premium Volume (Illinois)*</u>	<u>Percent Change (+ or -)**</u>
1.	Automobile Liability Private Passenger Commercial		
2.	Automobile Physical Damage Private Passenger Commercial		
3.	Liability Other Than Auto		
4.	Burglary & Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler & Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine _____		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Worker's Compensation	\$729,699.00	
16.	Other:		



Line of Insurance

Does filing only apply to certain territory (territories) or certain classes? No

If so, specify: _____

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): **IMT Insurance Company is filing, effective January 1, 2008, our wish to adopt the NCCI filing of advisory rates and rating values that were filed and approved to be effective that date.**

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

IMT Insurance Company (Mutual)
Name of Company

Jason Thompson, BA, MA Filing Analyst, Research & Development
Official - Title

RECEIVED

OCT 22 2007

ILLINOIS IDPR (MPC)
DIVISION OF INSURANCE
SPRINGFIELDILLINOIS SUMMARY SHEET
FORM RF-3

Change in Company's premium or rate level produced by rate revision effective:		01/01/2008
(1)	(2)	(3)
Coverage	Annual Premium Volume (Illinois)*	Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Workers Compensation	15,876,653	+3.5%
16. Other:		

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

Brief description of filing (if filing follows rates of any advisory organization, specify organization).

Midwest Insurance Company is adopting the NCCI advisory rates effective January 1, 2008 with 10% downward deviations for class codes 2003, 3145, 3400, 3632, 8001, 8006, 8010, 8017, 8018, 8021, 8033, 8046, 8832, 9052, 9058, 9060, 9082, 9083, 9586. A schedule is attached.

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

Midwest Insurance Company

Name of Company

Larry E. Hochstetler-VP Planning

Official - Title

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective January 1, 2008

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private		
Passenger Commercial		
2. Automobile Physical Damage		
Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers' Compensation</u>	7,647,111	0.3%
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: _____

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Adopting NCCI Loss Costs and revising Company LCM's

*Adjusted to reflect all prior rate changes.

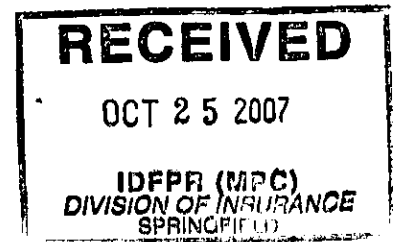
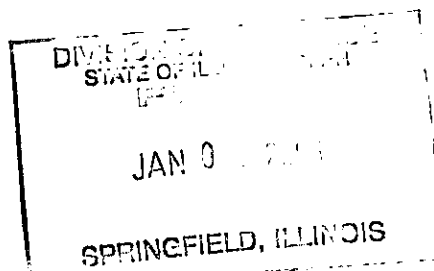
**Change in Company's premium level which will result from application of new rates.

Milwaukee Casualty Ins. Co.

Name of Company

Jon Zettlau- Bureau/Forms Compliance Manager

Official - Title



ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective January 1, 2008

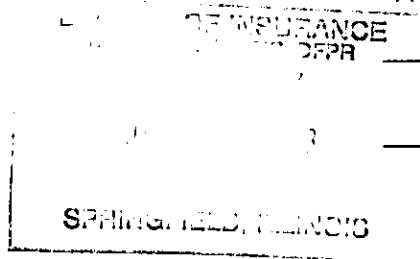
(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers' Compensation</u> Line of Insurance	793,436	-2.9%

Does filing only apply to certain territory (territories) or certain classes? If so, specify: _____

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Adopting NCCI Loss Costs and revising Company LCM's

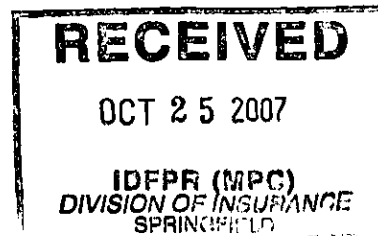
*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.



Milwaukee Insurance Co.
Name of Company

Jon Zetlau- Bureau/Forms Compliance Manager
Official - Title



RECEIVED

OCT 26 2007

IDFPR (MPC)
DIVISION OF INSURANCE
SPRINGFIELD**Illinois****ILLINOIS SUMMARY SHEET****FORM RF-3**

Change in Company's premium or rate level produced by rate revision effective:

3/1/08

(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+ or -) **
1. Automobile Liability Private Passenger		
Commercial		
2. Automobile Physical Damage Private Passenger		
Commercial		
3. Liability Other than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Workers Compensation	18,452,214	3.2%
16. Other:		

DIVISION OF INSURANCE
STATE OF ILLINOIS/IDFPR
FILED
MAR 01 2008
SPRINGFIELD, ILLINOIS

Does filing only apply to certain territory (territories) or certain classes? If so, specify.

Not Applicable

Brief description of filing (if filing follows rates of an advisory organization, specify organization).

We are adopting the 1/1/2008 NCCI IL voluntary rates with an effective date of 3/1/2008.

* In-force Written Premium

** Change in Company's premium level which will result from application of new rates.

National Fire Insurance Company of Hartford
Name of CompanyAmanda Castello - Actuarial Analyst
Official - Title

RECEIVED

OCT 23 2007

IDFPR (MPC)
DIVISION OF INSURANCE
SPRINGFIELD

Illinois

ILLINOIS SUMMARY SHEET

FORM RF-3

Change in Company's premium or rate level produced by rate revision effective 01/01/2008

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Workers Compensation	\$643,123	+1.6%
16. Other _____		
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify _____

No _____

Brief description of filing (if filing follows rates of an advisory organization, specify organization) _____

Adoption of NCCI Workers Compensation Loss Cost Reference Filing Number IL-2007-08, effective 01/01/2008.

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

National Interstate Insurance Company

Name of Company

Kathy Juhasz, Regulatory Compliance Spec.

Official — Title

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 1/1/2008

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers Compensation</u>	2,636,436	-0.7%
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: All except Class Code 8116Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Adopting NCCI loss costs
and modifying LCM's

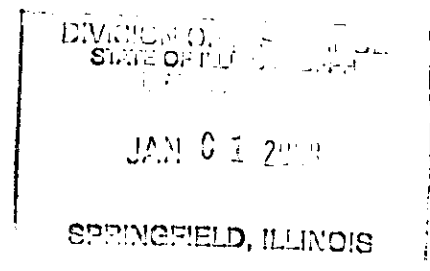
*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

Nationwide Agribusiness insurance Company

Name of Company

Official - Title



SUMMARY SHEET

Change in Company's premium or rate level produced by rate
revision effective January 1, 2008.

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers Compensation</u>	<u>\$10,670,406</u>	<u>+1.6</u>
<u>Line of Insurance</u>		

Does filing only apply to certain territory (territories) or certain classes?
If so, specify: _____

Brief description of filing. (If filing follows rates of an advisory
organization, specify organization): Adoption of NCCI IL-2007-05, Advisory Loss
Costs, Rates, Rating Values, and Retro
Rating Plan Parameters

- * Adjusted to reflect all prior rate changes.
** Change in Company's premium level which will
result from application of new rates.

Old Republic General Insurance Corporation
Name of Company

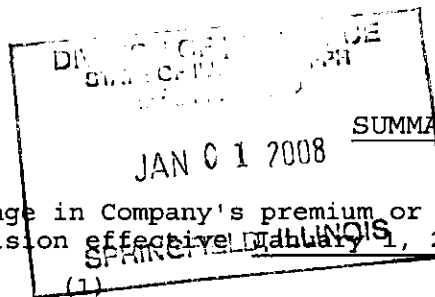
Deborah J. Matthews - Assistant Vice President, Compliance
Official - Title

RECEIVED

OCT 18 2007

IDFPR (MPC)
DIVISION OF INSURANCE
SPRINGFIELD

Form (RF-3)

**SUMMARY SHEET**Change in Company's premium or rate level produced by rate
revision effective January 1, 2008

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers Compensation</u>	\$10,670,406	+1.6
<u>Line of Insurance</u>		

Does filing only apply to certain territory (territories) or certain classes?
If so, specify: All Workers Compensation ClassesBrief description of filing. (If filing follows rates of an advisory
organization, specify organization): Adoption of NCCI IL-2007-05, Advisory Loss
Costs, Rates, Rating Values, and Retro
Rating Plan Parameters

- * Adjusted to reflect all prior rate changes.
** Change in Company's premium level which will
result from application of new rates.

Old Republic Insurance Company
Name of CompanyDeborah J. Matthews - Assistant Vice President
Compliance
Official - Title

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 1/1/08

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers' Compensation</u> Line of Insurance	8,618,396	4.56%

Does filing only apply to certain territory (territories) or certain classes? If so, specify: No

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Adoption of the NCCI 1/1/08 rates.

*Adjusted to reflect all prior rate changes.

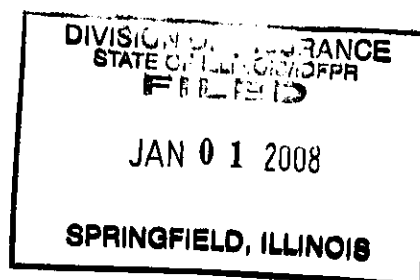
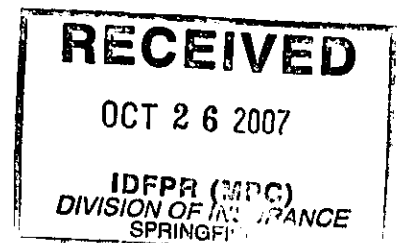
**Change in Company's premium level which will result from application of new rates.

Regent Insurance Company

Name of Company

Dawn Underdahl - System Support Specialist

Official - Title



RECEIVED

OCT 29 2007

**IDFPR (MPC)
DIVISION OF INSURANCE
SPRINGFIELD**

Form (RF-3)

SUMMARY SHEETChange in Company's premium or rate level produced by rate
revision effective 02/01/2008

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers Compensation</u>	<u>46,502</u>	<u>3.3%</u>
<u>Line of Insurance</u>		

Does filing only apply to certain territory (territories) or certain classes?
If so, specify: _____Brief description of filing. (If filing follows rates of an advisory
organization, specify organization): With this filing we are adopting the rate
revision as set forth in NCCI Circular IL-
2007-08.

- * Adjusted to reflect all prior rate changes.
** Change in Company's premium level which will
result from application of new rates.

**DIVISION OF INSURANCE
STATE OF ILLINOIS/IDFPR
FILED**

FEB 01 2008

SPRINGFIELD, ILLINOISRepublic-Franklin Insurance Company
Name of CompanyGeorge T. Dodd, Vice President/Actuary
Official - Title

H29219D

INS00106

RECEIVED

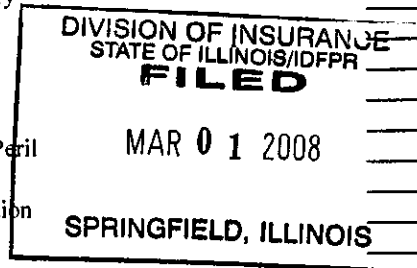
OCT 26 2007

IDFPR (MPC)
DIVISION OF INSURANCE
SPRINGFIELD**Illinois****ILLINOIS SUMMARY SHEET****FORM RF-3**

Change in Company's premium or rate level produced by rate revision effective:

3/1/08

(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+ or -) **
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Workers Compensation	4,064,966	3.1%
16. Other:		



Does filing only apply to certain territory (territories) or certain classes? If so, specify.

Not Applicable

Brief description of filing (if filing follows rates of an advisory organization, specify organization).

We are adopting the 1/1/2008 NCCI IL voluntary rates with an effective date of 3/1/2008.

* In-force Written Premium

** Change in Company's premium level which will result from application of new rates.

Transportation Insurance Company

Name of Company

Amanda Castello - Actuarial Analyst

Official - Title

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective January 1, 2008

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private		
Passenger Commercial		
2. Automobile Physical Damage		
Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers' Compensation</u>	215,634	-1.2%
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: _____

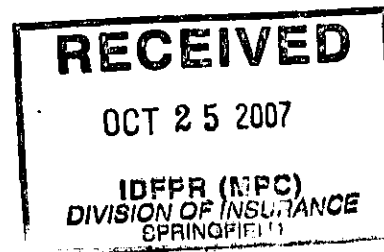
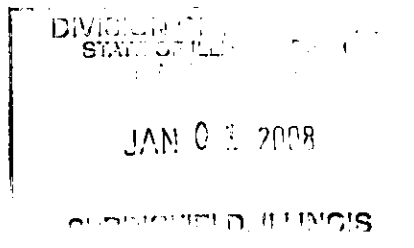
Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Adopting NCCI Loss Costs and revising Company LCM's

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

Trinity Universal Ins. Co.
Name of Company

Jon Zettlau- Bureau/Forms Compliance Manager
Official - Title



ILLINOIS SUMMARY SHEET

FORM RF-3

Change in Company's premium or rate level produced by rate revision effective January 1, 2008.

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Workers Compensation	\$ 117,377	-20%
16. Other _____		
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify _____

Filing applies to all standard classes _____

Brief description of filing (if filing follows rates of an advisory organization, specify organization) _____

Adoption of NCCI's new rates by using our approved deviation of -10%. _____

* Adjusted to reflect all prior rate changes.

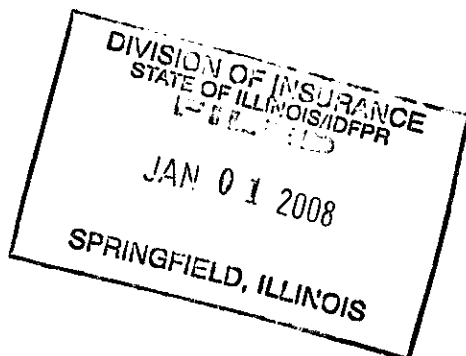
** Change in Company's premium level which will result from application of new rates.

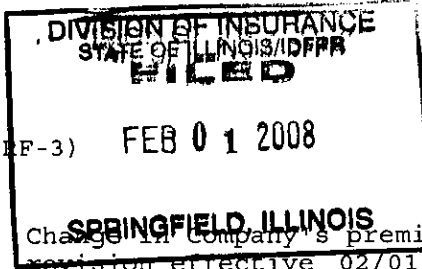
Ullico Casualty Company

Name of Company

David Christliff AVP and Actuary

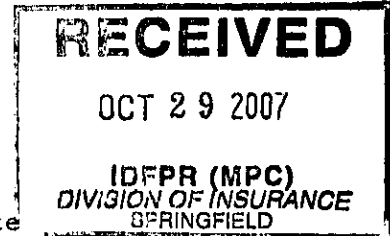
Official — Title





Form (IF-3)

SUMMARY SHEET



Change in Company's premium or rate level produced by rate
revision effective 02/01/2008

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers Compensation</u>	3,706,513	4.1%
<u>Line of Insurance</u>		

Does filing only apply to certain territory (territories) or certain classes?
If so, specify: _____

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): With this filing we are adopting the rate revision as set forth in NCCI Circular IL-2007-08.

- * Adjusted to reflect all prior rate changes.
** Change in Company's premium level which will result from application of new rates.

Utica Mutual Insurance Company
Name of Company

George T. Dodd, Vice Presiden/Actuary
Official - Title

RECEIVED

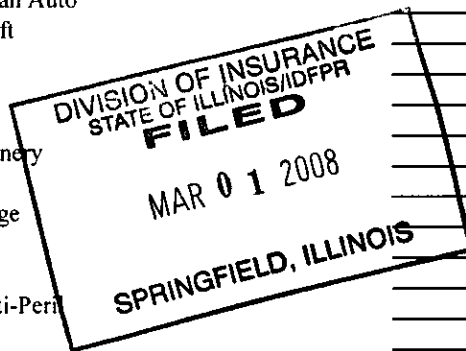
OCT 26 2007

IDFPR (MPC)
DIVISION OF INSURANCE
SPRINGFIELD**Illinois****ILLINOIS SUMMARY SHEET****FORM RF-3**

Change in Company's premium or rate level produced by rate revision effective:

3/1/08

(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+ or -) **
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Workers Compensation	21,023,293	4.1%
16. Other:		



Does filing only apply to certain territory (territories) or certain classes? If so, specify.

Not Applicable

Brief description of filing (if filing follows rates of an advisory organization, specify organization).

We are adopting the 1/1/2008 NCCI IL voluntary rates with an effective date of 3/1/2008.

* In-force Written Premium

** Change in Company's premium level which will result from application of new rates.

Valley Forge Insurance Company

Name of Company

Amanda Castello - Actuarial Analyst

Official - Title

Form (RF-3)

SUMMARY SHEET

RECEIVED

OCT 25 2007

IDFPR (IDFC)
DIVISION OF INSURANCE
SPRINGFIELD

Change in Company's premium or rate level produced by rate revision effective January 1, 2008

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers' Compensation</u>	\$22,763,189	+4.3%
<u>Line of Insurance</u>		

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

N/A

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Overall premium level change +4.3%

Westfield Insurance Company #228-24112

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will
result from application of new rates.

Westfield Insurance Co.

Name of Company

Rhonda Roberts

Production Specialist

Product Management

Official - Title

Form (RF-3)

SUMMARY SHEET

RECEIVED

OCT 25 2007

IDFPR (MPC)
DIVISION OF INSURANCE
SPRINGFIELDChange in Company's premium or rate level produced by rate revision effective January 1, 2008

(1) <u>Coverage</u>		(2) <u>Annual Premium</u> <u>Volume (Illinois)*</u>	(3) <u>Percent</u> <u>Change (+ or -)**</u>
1.	Automobile Liability Private Passenger Commercial		
2.	Automobile Physical Damage Private Passenger Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other <u>Workers' Compensation</u>	<u>\$1,864,114</u>	<u>+3.8%</u>
	<u>Line of Insurance</u>		

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

N/A

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Overall premium level change +3.8% and a previously filed deviation of 1.25 from the NCCI ratesWestfield National Insurance Company #228-24120

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will
result from application of new rates.Westfield National Insurance Co.
Name of CompanyRhonda Roberts
Production Specialist
Product Management

Official - Title